

Part I General Information

1 Name of organization
I.B.E. W. LOCAL UNION #99 PAC

2 Mailing address (P.O. Box or number, street, and room or suite number)
NINETY NINE WAY

City or town, state, and ZIP code
CRANSTON RHODE ISLAND 02921

3 E-mail address of organization

Employer identification number
05 0161150

4a Name of custodian of records

THOMAS LYNCH

4b Custodian's address

NINETY - NINE WAYCRANSTON R.I. 02921

5a Name of contact person

SAME

5b Contact person's address

6 Business address of organization (if different from mailing address shown above). Number, street, and room or suite number

City or town, state, and ZIP code

Part II Purpose

7 Describe the purpose of the organization

POLITICAL CONTRIBUTIONS**Part III** List of All Related Entities (see instructions)

8a Name of related entity	8b Relationship	8c Address



